

# Washington Update

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## 1. EMS Performance Measures Web Site Launched

The EMS Performance Measures Project seeks to create a "Guide to EMS Performance Measures" based on EMS community consensus. The Guide will contain performance measurement questions that the EMS community wants to be able to routinely answer on the local, state, and national level. The project is coordinated by NASEMSD in partnership with the National Association of EMS Physicians, and supported by the National Highway Traffic Safety Administration and the Health Resources and Services

Administration. A Web site has been launched for this project at [www.measureems.org](http://www.measureems.org) <<http://www.measureems.org/>> .

## 2. Bush Administration Budget Causes Concern

The Bush Administration has delivered its budget request to Capitol Hill and several organizations are expressing concern. The Association of State and Territorial Health Officials (ASTHO) says that: "The Administration's proposed FY 2005 budget reflects a commitment to continued support of important public health programs but comes up short in supporting state anti-terror efforts." ASTHO warns that proposed cuts to states of \$144 million in terrorism preparedness funding could jeopardize state-based public health's ability to respond to a terror event, outbreak of infectious disease, or other public health threat or emergency.

The American Public Health Association (APHA) believes the budget for the Public Health Service - those federal agencies dedicated to preventing disease, advancing medical knowledge, delivering key health care services, ensuring food safety, and training a diverse health and public health workforce - is inadequate. APHA notes that the FY 2005 budget includes \$571.6 billion for federal health programs and research funded through the Department of Health and Human Services (HHS), and increase of \$15.2 billion over FY 2004. However, the budget proposal for the agency calls for \$67.2 billion in discretionary spending, a decrease of \$1.1 billion from FY 2004.

Finally, the proposed budget includes no funding for the Metropolitan Medical Response System (MMRS), which received \$50 million in FY 2004. The MMRS provides funding to help major U.S. cities develop plans for coping with the health and medical consequences of a terrorist attack with chemical, biological or radiological weapons. Currently, more than 100 U.S. cities receive money from the program. The Administration did not request money for this program in the FY 2004 budget, but Congress funded it.

## 3. NASEMSD Signs Letter Regarding 8th Scope of Work for Medicare QIOs

Medicare is developing the Eighth Scope of Work for their Quality Improvement Organizations (QIOs), formerly known as Peer Review Organizations. QIOs work with specific provider types to improve the

quality of care provided to Medicare beneficiaries. Currently, the scope of work does not include ambulance services. Several organizations, including NASEMSD, have written to ask CMS to either include EMS as a required activity, or at least to allow QIOs flexibility to conduct demonstration projects that could assess quality for the emergency patient from the ambulance run through hospital discharge. Some of the other organizations signing the letter are: National Organization of State Offices of Rural Health, National Rural Health Association, New England Council for Emergency Medical Services, North Central EMS Institute, and Maine Ambulance Association.

#### 4. GAO Review Recommends Management Structure Revisions at CDC

The General Accounting Office (GAO) recommended that CDC officials consider revision to the management structure of the agency to allow continued progress on non-emergency public health programs when emergencies, such as anthrax or SARS outbreaks, arise. The GAO issued the recommendation as part of a review of the CDC that began before Julie Gerberding became director of the agency. The complete report, GAO-04-219, is available at [www.gao.gov](http://www.gao.gov) <<http://www.gao.gov>> .

#### 5. Change in the HRSA Trauma-EMS Systems Program Mid-Year Report

The HRSA Trauma-EMS Systems Program has announced a change in the requirements for reporting activities for those states eligible to apply for the FY 2004 Non-Competing Continuation Guidance. Previously, these states had been required to submit a Mid-Year Progress Report for funding received in FY 2003. Instead, the Trauma-EMS Systems Program will forgo the Mid-Year Progress Report and include a Progress Report section in the FY 2004 Non-Competing Continuation Guidance. The guidance should be released in mid-February. Once available, HRSA suggests that states read it carefully and submit all required information in the format requested.

#### 6. First Responder Report Due in Spring

According to the Jan. 26, 2004, issue of Federal Communications Week, the federal government hopes to release a major document that catalogs the priorities of first responders reflecting the conclusions and observations of various national reports and surveys by early spring.

The final report is anticipated to provide a complete inventory of first responder needs based on analysis of after-action reports and existing surveys and reports, a basis for development of new technology, and a document to help state and local agencies procure technology and equipment for first responders.

#### 7. Senate Passes Bill to Give First Responders Access to Best Equipment

Local police and firefighters could gain access to the latest homeland security technology being used by federal authorities under the bill passed by the Senate on Feb. 4, 2004. The Homeland Security Technology Improvement Act of 2003 (S. 1612) was introduced by Sen. Susan Collins (R-ME) and passed by a voice vote. It authorizes \$50 million a year to help local and state law enforcement agencies upgrade the equipment they use in training for terrorist attacks. The bill creates a "technology transfer" program within the Department of Homeland Security, where officials would determine what technologies might be useful at the local and state level. The Office of Domestic Preparedness would run the program. The bill was sent to the House of Representatives on Feb. 6, 2004. For complete bill text and tracking information, visit <http://thomas.loc.gov> <<http://thomas.loc.gov/>> .

#### 8. CDC Plans Biodefense Testing

According to CDC Associate Director for Terrorism Preparedness and Response Joseph Henderson, health officials are developing scenarios to test regional smallpox defenses and bioterrorism preparations by late 2004. The federal standards-based exercise scenarios will be used to measure how state and regional public health and emergency departments have adopted CDC guidelines and how they would respond to a biological terrorist attack. The tests are part of the CDC's 2004 action plan for boosting smallpox defenses. CDC officials also are planning a campaign to raise awareness of the smallpox threat and assuage fears about the vaccine. Henderson spoke to a Health and Human Services Department Advisory Council.

#### 9. Statistics Available From National Hospital Ambulatory Medical Care Survey

The Ambulatory Care Statistics Branch of the National Center for Health Statistics collected mode of arrival in the National Ambulatory Medical

Care Survey between 1997 and 2000. The question is back on the form for 2003. The data files are publicly available and can be downloaded at [www.cdc.gov/nchs/about/major/ahcd/ahcd1.htm](http://www.cdc.gov/nchs/about/major/ahcd/ahcd1.htm). The data can be analyzed by patient's reason for visit, primary ED diagnosis, services provided in the ED including diagnostic and therapeutic services, medications, etc.

#### 10. CMS Announces the Standard Unique Health Identifier for Health Care Providers

The Centers for Medicare & Medicaid Services (CMS) announced the adoption of the National Provider Identifier (NPI) as the standard unique health identifier for health care providers to use in filing and processing health care claims and other transactions. The final rule establishing the NPI as the standard unique health identifier was published in the Federal Register on Jan. 23, 2004. The effective date of this final rule will be May 23, 2005. The standard unique health identifier is mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). To view the Federal Register article, visit <http://www.gpoaccess.gov/fr/>.

#### 11. CAAS Accredits Three Agencies

The CAAS Panel of Commissioners granted accreditation to three agencies at their December meeting. Rural Metro Medical Services of Rochester, N.Y.; LifeNet, Inc. of Texarkana, Texas; and Rural/Metro Medical Services of Central New York, Syracuse were granted a three-year re-accreditation. There are currently 88 CAAS-accredited agencies in 28 states across the country with more than 120 agencies now working on new applications in the United States and Canada. Additional information is available at [www.caas.org](http://www.caas.org) <<http://www.caas.org/>> .

#### 12. CAAS Announces New Commissioner and Board Appointment

The CAAS Board of Directors elected Dr. Kathy J. Rinnert, MD, MPH, to its Panel of Commissioners as health care representative. Dr. Rinnert replaces Dr. Robert Domeier, MD, FACEP, who held this position from Jan. 1, 2001, until Dec. 31, 2003. Mark Postma, executive director of MEDIC EMS, headquartered in Davenport, Iowa, has been named to the CAAS Board of Directors as representative of the American Ambulance Association. He replaces Kenneth Cummings, executive director of Tri-Hospital, EMS. For more information, contact Meredith Hellestrae at [meredithh@tcag.com](mailto:meredithh@tcag.com).

### 13. New Report Highlights U.S. Medical Cost of Injuries

Injuries cost the United States and estimated \$117 billion in medical expenses each year, according to a report released Jan. 15, 2004, by the CDC. This estimate represents approximately ten percent of total medical spending and is similar in magnitude to the medical costs associated with other leading public health concerns such as obesity and smoking. The report, "Medical Expenditures Attributable to Injuries in the United States, 2000," was published in the Jan. 16, 2004, issue of the Morbidity and Mortality Weekly Report and is available at the CDC Web site at [www.cdc.gov/injury](http://www.cdc.gov/injury).

### 14. NINDS Publishes Seminar Report

The National Institute of Neurological Disorders and Stroke (NINDS) published the final report from the December 2002 symposium, "Improving the Chain of Recovery for Acute Stroke in Your Community." The report is available online at [www.ninds.nih.gov/strokeworkshop](http://www.ninds.nih.gov/strokeworkshop). Nearly 100 partners, including NASEMSD, promoted this symposium and contributed to the efforts to bring about important changes in the treatment of acute stroke.

### 15. ASPH Accepting Applications for ASPH/NHTSA EMS Fellowship

The Association of Schools of Public Health (ASPH) is accepting applications for the new ASPH/NHTSA Emergency Medical Services (EMS) Fellowship. Selected fellows will work directly with NHTSA and HRSA program managers and senior staff involved in inter-agency EMS program development. The selected fellow will conduct research and policy analysis to substantiate the need for, and effectiveness of, EMS and public health integration. The fellow also will conduct legislative tracking and policy analysis related to EMS Primary Injury Prevention programs at the national and state level. Detailed project descriptions and all application materials are posted on the ASPH Web site at [www.asph.org](http://www.asph.org) <<http://www.asph.org>> .

### 16. Information on Ricin is Available

The latest terrorist scare at the Senate offices concerns ricin. The CDC provides links to emergency preparedness and response information related to ricin at [www.bt.cdc.gov](http://www.bt.cdc.gov) <<http://www.bt.cdc.gov/>> . In addition, the Arizona Department of Health Services provides a "Ricin Fact Sheet" at

[www.hs.state.az.us/phs/edc/edrp/es/ricinf.htm](http://www.hs.state.az.us/phs/edc/edrp/es/ricinf.htm).

#### 17. Bird Flu Discovered on Two Delaware Farms

Tests confirm avian flue on two Delaware farms. According to Ag-Security.com, the flu strain is different from the one that has spread to the human population in Asia, killing at least 19. It does not appear at this time to be a significant threat to humans. The simultaneous occurrence of Avian Influenza in multiple locations around the world could mark the beginning of a significant shift in the influenza genome. Those interested can sign up to receive alerts and monthly newsletters at [www.ag-security.com](http://www.ag-security.com) <<http://www.ag-security.com/>> .

#### 18. Traffic Safety Facts 2002 Now Available

"Traffic Safety Facts 2002: A Compilation of Motor Vehicle Crash Data from the Fatality Analysis Reporting System and the General Estimates System" has been completed and posted. This report is from the U.S. Department of Transportation's National Highway Traffic Safety Administration. The full report is available at <http://www-nrd.nhtsa.dot.gov/pdf/nrd-30/NCSA/TSFAnn/TSF2002Final.pdf>.

#### 19. Correction - Homeless Trained as Ambulance Drivers

In the last issue of the Washington Update, it was reported that a new program in New York would train the homeless as ambulance drivers. According to the office of the NYC Mayor, no such program exists.

#### 20. Trauma & Critical Care Coordinator Needed - Virginia

The Virginia Department of Health, Office of Emergency Medical Services (EMS) seeks a qualified applicant to provide program development, planning, monitoring, analysis; grants management; recommending policies and procedures; program research; and, evaluating changes in rules, regulations and legislative proposals for impact on service delivery. Responsibilities of this position include: managing the Trauma Center Designation Program; coordination and development of the statewide Trauma System and Triage Plan; managing the Prehospital Patient Care Reporting Data Collection Program; and managing the Trauma Registry Program. Starting salary range \$35,695-57,112. Mail/fax state application by 5:00 pm on February 27, 2004 to: Virginia Department of Health, Office of Emergency Medical Services, Attn: Position # 05157, 109 Governor St., Suite UB-55, Richmond, VA 23219 or Fax 804-864-7580. Download a Virginia Application for Employment (#10-012) at [www.dhrm.state.va.us](http://www.dhrm.state.va.us) <<http://www.dhrm.state.va.us/>> . A copy of the employee work profile (EWP) for this position may be obtained from Dennis Molnar, business manager, OEMS, at [Dennis.Molnar@vdh.virginia.gov](mailto:Dennis.Molnar@vdh.virginia.gov) or (804) 864-7601.

## 21. Upcoming Events

ComCARE Interoperability Day March 11, 2004, Washington, D.C. Contact Jason Conley of the ComCARE Alliance at (202) 429-0574 or via email at [jconley@comcare.org](mailto:jconley@comcare.org), to find out how you can participate. Note: This event has been rescheduled from the original date of Jan. 29, 2004.

CAAS Accreditation Seminar, April 28, 2004, Las Vegas, NV. Information is available at [www.caas.org](http://www.caas.org) <<http://www.caas.org/>> .